Delaware Health Care Commission

Delaware Institute of Dental Education and Research (DIDER)
Board of Directors
Wednesday, February 10, 2016
3:00 p.m.

Herman Holloway Health & Social Services Campus Main Administration Building, Room 198, New Castle and Jesse Cooper Building, Third Floor Conference Room, Dover

Meeting Minutes

Board Members Present: Louis Rafetto, DMD, Chair; Theodore W. Becker, Jr.; Lisa Goss, RDH, BS; Brian S. McAllister, DDS; and Wanda Gardiner Smith, DDS.

Participating by Telephone: Gregory B. McClure, DMD, MPH

Staff Attending: Helen Arthur, Director of Planning and Policy; and Marlyn Marvel, Community Relations Officer.

Call to Order and Opening Remarks

Chairman Louis Rafetto, DMD called the meeting to order at 3:00 p.m.

May 13, 2015 Meeting Minutes

No action could be taken on the May 13, 2015 meeting minutes due to the lack of a quorum.

State Dental Director's Report

Dr. Greg McClure stated that La Red Health Center just lost a full time dentist. It is not certain whether she left the state. She was licensed under the provisional program. Henrietta Johnson Medical Center lost their main dentist. She went into private practice. One of the dentists in the Division of Public Health clinics is retiring in March. La Red has a large number of patients.

The Give Kids a Smile event last Saturday in Milford was a success. There were over 140 children. Many of them were not eligible for Medicaid because they are not legal residents. La Red is doing what it can and the Division of Public Health clinics are trying to see the children. It is a difficult situation.

Since last May, Medicaid authorized the fluoride varnish for physicians. Medicaid said that the Managed Care Organizations are responsible for paying and are also responsible for promoting and training. This new policy was effective as of January 1, 2016. The Nemours Pediatric Clinical System is trying to promote it from within. An event is planned for May for physicians to try to promote the fluoride varnish and provide some training on how to incorporate it into their practices. The official training for physicians is an on line program.

The Division of Public Health was awarded a rural health workforce grant. There are three main projects. One is to increase access for people with disabilities by trying to get more dentists to be able to see these patients. The first phase is underway with the University of Delaware where they are conducting a survey of dentists and a survey of people with disabilities to determine the need. In the next few years, the Division of Public Health will be involved in a training program where they look at the consortium work and residency programs with the Dental Society and the University of Delaware supporting it.

The second phase is an expansion of the outreach programs for schools and community renovations. The third phase is again dealing with the fluoride varnish.

This is a HRSA grant and HRSA is promoting the integration of oral health and dental care into medical care. The Division of Public Health received funding for each of the Federally Qualified Health Centers (FQHCs) to bring on a coordinator to get those connections between the physicians and dentists. Each of the FQHCs has a contract; however, Henrietta Johnson Medical Center had to terminate theirs when they lost their dental director, and will not be participating. Hopefully next year they can come back on board.

The oral health campaign continues. They are moving into a new phase concentrating on social media. All of the other programs, including the sealant program are running. With regard to Medicaid, utilization for children is still only around 50 percent. It is not that there are not enough dentists; there is just not the demand.

The adult Medicaid coverage was introduced by Secretary Rita Landgraf into the budget process but did not make it into the Governor's recommended budget and will not be supported by the administration at this point.

Dr. Brian McCallister asked if it is correct that Henrietta Johnson Medical Center currently has no dentists. Dr. McClure stated that they do not have any full time staff dentists. They have three dentists who are putting a total of six days into the two clinic sites.

Dr. McAllister asked how many dentists La Red has. Dr. McClure stated that they have one and one half.

Dr. McAllister stated that he thought there was a discussion with the FQHCs that there was a contract and that dentists with a provisional license could not just walk away. Dr. McClure stated that the legislation requires them to complete a two year commitment. Dr. Rafetto stated that they definitely talked about that and they must complete the two year commitment before an unlimited license is granted.

Dr. McAllister stated that this is something that needs to be discussed at the Board level because they do not know who the provisional licensees are that are taking the exam. He does not know if there is a mechanism once they pass at the Division level to recognize them as provisional license holders. This needs to be discussed at the March Board of Dentistry and Dental Hygiene meeting.

Discussion: Key Policy Issues to Present to Legislators

Dr. Rafetto stated that the Board had talked about developing a list of three or four points to discuss with someone like Senator Bethany Hall Long. One suggestion was to mandate preventative dental exams for children before the third grade.

Dr. Rafetto stated that he had a conversation with Sherman Townsend, Chair of the Delaware Institute for Medical Education and Research (DIMER) Board of Directors. He wanted to start his lobbying efforts in the fall on behalf of DIMER but learned that both the Sidney Kimmel Medical College and the Philadelphia College of Osteopathic Medicine (PCOM) had hired a professional lobbyist to assist with their approach to the legislature. There is a need to determine who to identify as the key legislators to approach. Dr. Rafetto suggested that Bethany Hall Long would be one. Mr. Townsend is going to do some research to determine who should be contacted.

Dr. Rafetto stated that the Delaware Institute for Dental Education and Research (DIDER) does not include the words "access to care" or "underserved" or those kinds of things which have been a large part of DIDER's focus. He asked if DIMER is doing the same kinds of things that DIDER is doing. If DIDER partners with them, will they be partnering about the same kinds of issues, or is DIMER strictly focusing on funding for their medical schools?

Ms. Arthur suggested to direct this question to Sherman Townsend.

Dr. Rafetto stated that the Board needs to determine whether it wants to prioritize things like restoring or maintaining the funding for the seats at Temple Dental School versus loan repayment or adult Medicaid. It needs to determine what is the most important. Of the three priorities, funding for seats at Temple Dental School, adult Medicaid and loan repayment, which one is first, second, or third?

Dr. Rafetto stated that adult Medicaid has educational benefits because of the impact it would have on the residency program. By bringing in more money the program could be expanded. That would probably bring more practitioners to the state. It would certainly be providing more care.

Ted Becker stated that he thinks adult Medicaid would potentially have the most immediate impact.

Dr. McClure stated that it would also help the community clinics because currently they have to depend upon whatever funds they can raise to treat the adult population.

Dr. Rafetto stated that the DIDER Board will not have the impact by itself going to the legislative contacts that it would have if it can find the right partners, which he believes would be the Dental Society and Christiana Care.

Other Business

Affiliation Agreement with an Institution other than Temple

Dr. McAllister asked how many Temple dental students return to Delaware. Dr. Rafetto stated that all of them return.

Dr. Rafetto stated that he recently spoke with someone at the University of Maryland because there was some conversation about whether or not Temple was the right place and whether or not Maryland might be a better place. Part of that reasoning was that after a student attends the University of Maryland School of Dentistry for one year, they can declare Maryland resident status and have a significant reduction in tuition.

Dr. Rafetto spoke with his contact at the University of Maryland about whether or not they would be open to developing a relationship with Delaware. His comment was that there is some turmoil with the budget currently in Maryland. When Dr. Rafetto brought up people going there and changing their state residency, he stated that he did not know if that is a safe bet for the future. Dr. Rafetto stated that it seems that this would not be a good time to change based on that conversation.

Dr. Rafetto stated that the agreement with Temple results in one or two students a year being accepted into a dental school who may not have been accepted anywhere else. That is still of some value.

Ms. Arthur stated that Delaware is allocated five seats at Temple at \$12,500 per seat and Temple has not been able to fill all seats annually. In the past, the Health Care Commission has been authorized to use the funds allocated for the unfilled seats for the Loan Repayment Program, but the past two years the funding has been reverted.

Dr. Rafetto asked if it would make sense to limit the seats at Temple to three and see if two seats can be allocated at Maryland. Ms. Arthur stated that is an option; however, cautioned the timing, the value to Temple and University of Maryland and the overall fiscal impact this may have on the program. Dr. Rafetto stated that DIDER could also reduce the Temple seats to four and try to get one seat in Maryland, or reduce the seats to four and distribute the remaining funds to the students.

Dr. McAllister stated that in the past when DIDER's budget was reduced it chose to keep the seats at Temple and reduce the tuition assistance. Now the question is whether that was the correct thing to do.

Dr. Rafetto stated that DIDER could take the \$62,500 currently allocated for five seats and say that this is what it is going to spend per year. It wants this to be allocated to as many seats as possible and the residual to be used to offset the students' tuition. This is something that DIDER should consider in the future.

Division of Developmental Disabilities Services (DDDS) Clients

Dr. Rafetto stated that there was discussion about tracking the number of Division of Developmental Disabilities Services (DDDS) clients served by DIDER loan repayment recipients.

Ms. Arthur stated that the number of DDDS clients served by dentists must be tracked by DDDS. The staff does not have access to their client information. When the program was revised language was included in the program manual that reflects that mandate; however, the Loan Repayment contracts entered by the dentists must be contracts with eligible practice sites. Some of the sites are not in Health Professional Shortage Areas. If the practice sites do not meet the criteria of the State Loan Repayment Program, the clinicians cannot be forced to practice there and they cannot be forced to provide services for which they are not trained to provide. That is an issue because the budget epilogue directs the Health Care Commission to require DIDER loan repayment recipients to agree to provide preventive dental care to eligible clients of the DDDS. If there is an opportunity, that can be one of the areas for DIDER to focus on.

Ms. Arthur stated that there is \$72,500 remaining in FY 2015 DIDER loan repayment funds. In FY 2016 the DIDER loan repayment funds were reduced by \$31,700 from \$90,000 to \$58,300. There is \$250,000 for Temple University and \$148,000 for general practice residents' support at Christiana Care.

Dr. Rafetto stated that DIDER has come up short on applications for the Loan Repayment Program. He asked how that can be improved. Ms. Arthur stated that additional state funds have been requested to be able to have state only funded awards.

Dr. Rafetto stated that some of the applications were from residents at Christiana Care. Dr. McClure stated that Dr. Susan Pugliese is aware of the Loan Repayment Program, but he is not sure if it is being communicated to the residents. Dr. Rafetto stated that perhaps one of the reasons the program is not receiving applications is that DIDER is not doing a good job of marketing what is available.

Ms. Arthur stated that there is also epilogue language that states that the residents shall continue serving vulnerable populations at sites approved by the Delaware Health Care Commission and resume serving patients at the Delaware Psychiatric Center at such time as program requirements for residency training are met. It may be very important to reinstitute the residency rotations at Delaware Psychiatric Center to sustain the Christiana Care funding. This is a requirement per state budget epilogue.

Dr. Rafetto stated that it would probably be a good idea to get in touch with Dr. Pugliese at Christiana Care and review that program and the Loan Repayment Program. There was another faculty member in the general practice residency at Christiana Care who left a few months ago, so they are short staffed, but these are important issues. Dr. Daniel Meara, the Department Chair of Dentistry, should also be included.

"Blue Sky" Discussion to Evaluate DIDER and Future Goals

Dr. Rafetto stated that the DIDER Board needs to determine what is important to them and what they are going to do about it. Perhaps they should focus on adult Medicaid, dental student education and being more efficient with the Loan Repayment Program in terms of marketing. DIDER can focus on those three issues, as well as preventative dental exams for children. Other things, such as provisional licensure, may be dealt with as they come up.

Dr. McAllister stated that he is not aware of any other issues currently that are going to have the impact of those issues. He thinks that the Medicaid issue tops the funding education issue.

Dr. Rafetto stated that the DIDER Board needs to determine who will be their natural partners that they can work together with. For adult Medicaid they can partner with Christiana Care, the Dental Society and the Division of Public Health.

Dr. McClure stated that the Division of Public Health can provide information and education but it cannot do any type of advocacy regarding the Governor's budget.

Dr. McAllister stated that he thinks DIDER should also partner with the FQHCs.

Dr. McClure stated that another partner is the State Innovation Model (SIM) initiative. They have the payment section and he would like to see them do a report on the entire issue, including emergency department usage.

Ms. Arthur stated that the HCC administers the State Innovation Model project which is focused on health system transformation. This is a large priority for the state. There are committees focused on payment reform, population health, and clinical, workforce and education, patient and consumer advisory, and health information technology. The project is represented by a broad stakeholder group inclusive of the Division of Public Health. The federal grant project resulted in the creation of the Delaware Center for Health Innovation (DCHI). The DCHI Board is a 501C3 that is responsible for overall health transformation and the sustainability for health care reform. There are many different activities and initiatives associated with the project. There is also a lot of work in the state around telehealth and integration with Medicaid. The DCHI Board might be a good place to start and DIDER can try to get on that agenda.

Dr. Rafetto asked what the next step is. Ms. Arthur stated that the staff will put together the four pieces that DIDER wants to look at and take it to Laura Howard, the Executive Director. She is the person to elevate this to the proper people. The Workforce and Education committee may be a great place to start outreach and collaboration.

Mr. Becker stated that the workforce development piece is also very important.

Dr. McClure stated that there is also the Healthy Neighborhoods group. He suggested that DIDER send a strong letter to the DCHI Board asking them to look into the adult Medicaid issue and perhaps prepare some sort of analysis of the cost and benefits.

Dr. Rafetto stated they would be asked to develop that information for DIDER to use to advocate for adult Medicaid going forward.

Mr. Becker stated that the same request should be made for the workforce development piece and the healthy neighborhoods piece.

Dr. Rafetto stated that the letter will be to encourage development of information regarding the impact of an adult oral health Medicaid program in Delaware, workforce development and healthy neighborhoods. He will draft a template letter and circulate it to the Board for review.

Dr. McClure stated that Delaware is looking to reduce the costs of medical care. Insurance companies are finding that people with diabetes have reduced medical costs because they are receiving dental care. That is an important consideration. Dr. Rafetto stated that there are Emergency Room issues (ER) and those kinds of systemic health issues that support trying to get care to people before it is a crisis.

Dr. McClure stated that the hospital systems and managed care organizations are paying for the ER costs.

Dr. Rafetto stated that Dr. Daniel Meara did a study a couple of years ago tracking ER visits. In fact there is an article in the American Dental Association Journal about the ER visit issue. People go to the Emergency Room and get a prescription for pain medication and antibiotics. It is a very expensive way to get no specific treatment. Most of the patients end up not following up because something happens that reduces their assistance and they cannot get into to see the dentist, or there is a transportation issue, information issue, or education issue. They are not getting preventative care.

Ms. Arthur stated that the DCHI Workforce and Education Committee, in conjunction with the Health Care Commission, has prepared an online survey regarding the credentialing and licensing processes in Delaware. The committee wants to gather data from people with knowledge relative to licensing and credentialing health care practices. They would like to have information from several people, perhaps from different fields. Ms. Arthur asked the Board to consider participation and for suggested participants to complete the survey.

Dr. Rafetto stated that he, Jeff Cole and Dan Meara would be good contacts. Dr. McClure stated that it should also be sent to Medicaid. Dr. McAllister stated that it should be sent to Dr. Ray Rafetto. Ms. Arthur will send the survey to the recommended people.

Dr. Rafetto assigned the following people to serve as the point person to develop some objectives for each of the four focus areas:

- Adult Medicaid Dr. Brian McAllister
- Preventative dental exams for children before the age of 3 Dr. Greg McClure
- Student tuition and seats Dr. Louis Rafetto
- Loan Repayment Program Dr. Wanda Smith and Lisa Goss.

Dr. Rafetto asked the assigned people to prepare bullet points with substance and background to explain why these are important issues.

Ms. Arthur stated that Ted Becker can also help with crafting some bullet points for the Loan Repayment Program.

Next Meeting

The next meeting is scheduled for Wednesday, May 11, 2016 at 3:00 p.m. It will be held by video conference in two locations: Conference Room Number 198 on the first floor of the Main Administration Building at the Herman Holloway Campus in New Castle and the third floor conference room in the Jesse Cooper Building in Dover.

Adjourn

The meeting adjourned at 4:25 p.m.